

General Assembly

Amendment

January Session, 2005

LCO No. 8009

HB0661908009SD0

Offered by:

SEN. CRISCO, 17th Dist.

To: Subst. House Bill No. **6619**

File No. 816

Cal. No. 595

"AN ACT CONCERNING MEDICAL DISCOUNT PLANS."

- 1 After the last section, add the following and renumber sections and 2 internal references accordingly:
- "Sec. 501. Subsection (i) of section 5-259 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective*
- 5 *October 1, 2005*):

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- (i) The Comptroller may provide for coverage of employees of municipalities, nonprofit corporations, community action agencies and
- 8 small employers and <u>uninsured individuals</u>, individuals eligible for a
- 9 health coverage tax credit or members of an association for personal
- 10 care assistants under the plan or plans procured under subsection (a)
- 11 of this section, provided: (1) Participation by each municipality,
- 12 nonprofit corporation, community action agency, [or] small employer,
- 13 [or] uninsured individual, eligible individual or association for
- 14 personal care assistants shall be on a voluntary basis; (2) where an
- 15 employee organization represents employees of a municipality,

16 nonprofit corporation, community action agency or small employer, 17 participation in a plan or plans to be procured under subsection (a) of 18 this section shall be by mutual agreement of the municipality, 19 nonprofit corporation, community action agency or small employer 20 and the employee organization only and neither party may submit the 21 issue of participation to binding arbitration except by mutual 22 agreement if such binding arbitration is available; (3) no group of 23 employees shall be refused entry into the plan by reason of past or 24 future health care costs or claim experience; (4) rates paid by the state 25 for its employees under subsection (a) of this section are not adversely 26 affected by this subsection; (5) administrative costs to the plan or plans 27 provided under this subsection shall not be paid by the state; (6) 28 participation in the plan or plans in an amount determined by the state 29 shall be for the duration of the period of the plan or plans, or for such 30 other period as mutually agreed by the municipality, nonprofit 31 corporation, community action agency, small employer, uninsured 32 individual or association for personal care assistants and the 33 Comptroller; and (7) nothing in [public act 03-6 of the June 30 special 34 session* this section or section 12-202a, as amended by this act, 38a-35 551, 38a-553 or 38a-556, shall be construed as requiring a participating 36 insurer or health care center to issue individual policies to individuals 37 eligible for a health coverage tax credit. The Comptroller may arrange and procure for the employees, uninsured individuals and eligible 38 39 individuals under this subsection health benefit plans that vary from 40 the plan or plans procured under subsection (a) of this section. 41 Notwithstanding any provision of law the coverage provided under 42 this subsection may be offered [to employees] on either a fully 43 underwritten or risk-pooled basis at the discretion of the Comptroller, 44 except that coverage offered to small employers shall be fully 45 underwritten in accordance with part V of chapter 700c. For the 46 purposes of this subsection, (A) "municipality" means any town, city, 47 borough, school district, taxing district, fire district, district department 48 of health, probate district, housing authority, regional work force 49 development board established under section 31-3k, regional 50 emergency telecommunications center, tourism district established

51 under section 32-302, flood commission or authority established by 52 special act, regional planning agency, transit district formed under 53 chapter 103a, or the Children's Center established by number 571 of 54 the public acts of 1969; (B) "nonprofit corporation" means a nonprofit 55 corporation organized under 26 USC 501(c)(3) that has a contract with 56 the state; (C) "community action agency" means a community action 57 agency, as defined in section 17b-885; (D) "small employer" means a 58 small employer, as defined in subparagraph (A) of subdivision (4) of 59 section 38a-564, as amended by this act; (E) "eligible individuals" or 60 "individuals eligible for a health coverage tax credit" means persons 61 who are eligible for the credit for health insurance costs under Section 62 35 of the Internal Revenue Code of 1986, or any subsequent 63 corresponding internal revenue code of the United States, as from time 64 to time amended, in accordance with the Pension Benefit Guaranty 65 Corporation and Trade Adjustment Assistance programs of the Trade 66 Act of 2002 (P.L. 107-210); [and] (F) "association for personal care 67 assistants" means an organization composed of personal care 68 attendants who are employed by recipients of service (i) under the 69 home-care program for the elderly under section 17b-342, (ii) under the 70 personal care assistance program under section 17b-605a, (iii) in an 71 independent living center pursuant to sections 17b-613 to 17b-615, 72 inclusive, or (iv) under the program for individuals with acquired 73 brain injury as described in section 17b-260a; and (G) "uninsured 74 individual" means an individual who has no access to employer-75 sponsored or government-sponsored health insurance.

Sec. 502. Subsection (k) of section 5-259 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2005*):

(k) The Comptroller shall submit annually to the General Assembly a review of the coverage of employees of municipalities, nonprofit corporations, community action agencies, small employers under subsection (i) of this section and eligible individuals under subsection (i) of this section beginning February 1, 2004, and uninsured individuals beginning February 1, 2007.

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Sec. 503. (NEW) (Effective July 1, 2005) (a) As used in this section:

- (1) "Commissioner" means the Insurance Commissioner; and
- 87 (2) "Ineligible population" means (A) part-time employees, seasonal 88 employees and independent contractors who are not eligible to 89 participate in a group health insurance policy offered by an employer 90 or in any other group health insurance policy, as determined by the 91 commissioner, and (B) retired employees under the age of sixty-five 92 who are not eligible to participate in a group health insurance policy 93 offered by a former employer or in any other group health insurance 94 policy, as determined by the commissioner.
 - (b) Notwithstanding the provisions of chapter 700c of the general statutes, the Insurance Commissioner may approve any group health insurance policy or certificate which does not contain all the minimum coverages or benefits set forth in chapter 700c of the general statutes, provided such policy or certificate is approved only for issue to the ineligible population in this state.
 - Sec. 504. (NEW) (Effective October 1, 2005) (a) Not later than January 1, 2006, the Insurance Commissioner, in consultation with the Commissioner of Social Services and the Healthcare Advocate, shall develop a comprehensive public education outreach program to educate health insurance consumers about the availability and general eligibility requirements of various health insurance options in this state. The program shall maximize public information concerning health insurance options in this state and shall provide for the dissemination of such information on the Insurance Department's Internet web site.
- 111 (b) The information on the department's Internet web site shall 112 reference the availability and general eligibility requirements of (1) 113 programs administered by the Department of Social Services, 114 including, but not limited to, the Medicaid program, the HUSKY Plan, 115 Part A and Part B, and the state-administered general assistance 116 program, (2) health insurance coverage provided by the Comptroller

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under subsection (i) of section 5-259 of the general statutes, as amended by this act, (3) health insurance coverage available under comprehensive health care plans issued pursuant to part IV of chapter 700c of the general statutes, and (4) other health insurance coverage offered through local, state or federal agencies or through entities licensed in this state. The commissioner shall update the information on the web site at least quarterly."